

P25000620762

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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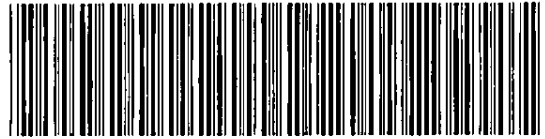
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2025 MAR 20 AM 10:20
TALLAHASSEE, FL

COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: LEGACY CONSTRUCTION & ROOFING INC
(PROPOSED CORPORATE NAME - **MUST INCLUDE SUFFIX**)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: JANINE MITCHELL
Name (Printed or typed)

23110 SR 54, PMB 336
Address

LUTZ, FL 33549
City, State & Zip

813-524-5530
Daytime Telephone number

janine@activatemylicense.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

LEGACY CONSTRUCTION & ROOFING INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

406 TERRANOVA ST
WINTER HAVEN FL 33884

Mailing address, if different is:

406 TERRANOVA ST
WINTER HAVEN FL 33884

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

100 TO BE HELD AT \$1.00 PAR VALUE EACH

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DARRYL W PERRINE PRES
Address: 406 TERRANOVA ST
WINTER HAVEN, FL 33884

Name and Title: _____
Address: _____

Name and Title: ANGELA RAE PERRINE VP
Address: 406 TERRANOVA ST
WINTER HAVEN, FL 33884

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: DARRYL W PERRINE
Address: 406 TERRANOVA ST
WINTER HAVEN, FL 33884

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DARRYL W PERRINE
Address: 406 TERRANOVA ST
WINTER HAVEN, FL 33884

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

DocuSigned by:

Darryl Wayne Perrine

0211DEE3C36A1A

Required Signature/Registered Agent

04/04/2025

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

DocuSigned by:

Darryl Wayne Perrine

0211DEE3C36A1A

Required Signature/Incorporator

04/04/2025

Date

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